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BIBDATASHEET

CONFIRMATION NO. 7978

Bib Data Sheet

SERIAL NUMBER 10/666,021	FILING OR 371(c) DATE 09/17/2003 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. SYM 306A
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APPLICANTS

Shmuel Shapira, Sherwood, OR;

** CONTINUING DATA *****

This application is a CIP of 10/253,807 09/23/2002 PAT 6,916,968
 which claims benefit of 60/324,278 09/25/2001
 and claims benefit of 60/344,795 01/07/2002
 and claims benefit of 60/348,381 01/16/2002
 and claims benefit of 60/354,530 02/08/2002
 and claims benefit of 60/357,624 02/20/2002
 and claims benefit of 60/373,637 04/19/2002
 This application 10/666,021
 claims benefit of 60/429,154 11/25/2002
 and claims benefit of 60/452,703 03/06/2003
 and claims benefit of 60/454,390 03/12/2003
 and claims benefit of 60/467,272 05/02/2003
 and claims benefit of 60/473,001 05/22/2003
 and claims benefit of 60/473,790 05/27/2003
 and claims benefit of 60/494,031 08/08/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 01/15/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OR	SHEETS DRAWING 16	TOTAL CLAIMS 65	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

23581

TITLE

SYSTEM AND METHOD FOR ASSESSING FLUID DISTRIBUTION

FILING FEE RECEIVED 906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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3-12-07